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ABSTRACT

As psychologists meet with educators to discuss the needs of various children, they bring different pedagogical backgrounds to the table. The body of psychological theory and science the psychologists have is essential, imperative, and indispensable to effective schooling. The diagnostic skills of psychologists are essential and not available to other school personnel. Psychologists are major players in diagnosing individual educational problems and in developing programs to ameliorate or, at least, minimize them. Periodic re-evaluation by both psychologists and educators is essential--classification as "exceptional" should not be in perpetuity. Psychologists, especially those prepared in the scientist-practitioner model, should be helpful in evaluating proposed programs for individuals or groups. In addition, psychologists: (1) have group leadership and management skills; (2) help to bridge the distance between schools and homes; (3) are familiar with the array of services available from nonschool sources; and (4) are teachers when they provide instruction to professional personnel, paraprofessional personnel, individuals or groups on topics such as communicating with parents, behavioral contraction, or crisis management. Psychological service units, providing for diversification of service, should be used to perform all these activities. Due to the volume of services needed in schools, the role of doctoral-level personnel needs to be re-examined. (JBJ)

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Chapter Three

Recycling the Basics for Evolving Schools: Psychologists as Fulcrums for Leveraging Improved Schooling

Joseph L. French

"And, in the beginning, there was school psychology" (French, 1990, p. 1).

When I first used that paraphrasing, I was trying to make it clear that the school emphasis in psychology is not new. As evidence for that position, I pointed to an address at an American Psychological Association (APA) meeting in 1896, 100 years ago, by Lightner Witmer in which he described his work as involving the "(1) investigation ... of mental development in school children,.... (2)... treatment of...children...[who had] defects interfering with school progress, (3)...offering of practical work to those engaged in teaching...and...social work...[with] normal and retarded children, [and] (4) training of students for a...career in connection with the school system, through the examination and treatment of...children" (Witmer, 1907, p. 6).

How far has the definition of school psychology come in the last 100 years? You can be the judge of that. How much will we change in the next 10 years? Today (in this volume), we will offer a number of suggestions. I will focus on a few. Most of them will address ways of doing better those things which Witmer was doing a century ago.

One of the first psychologists to write about "role" was R. B. W. Hutt, a student of Witmer's. In *The School Psychologist,* he concluded that "the function of the psychologist [is] to discover the facts of mentality in the individual and to explain the deviations in behavior. It is his function to find, and occasionally apply the cure" (Hutt, 1923, p. 51). I assume he meant that school psychologists spent more time in testing and in making recommendations than in providing treatment, but I find some satisfaction in noting that he used "occasionally" very close to the word "cure." More on "cure" later.

Whereas Hutt's writing about role was not very helpful for our discussions today, two years later, Walter was more descriptive. He identified six functions of a school psychologist which are still relevant today. He characterized school psychologists as persons who "bring to bear on educational problems the knowledge and techniques which have been developed by the science of psychology" (Walter, 1925, p. 167). High on his list of functions were assessment and intervention with the latter directed more to mental health than learning problems. The second half of his list is even more instructive for us today. These points were focused on bringing a unique point of view to bear on educational problems, contributing theory to the practice of education, and conducting research. It is on these points that I will focus in the rest of this paper.

A few years later, Ethyl L. Cornell emphasized these points to elementary school principals. She described the school psychologist as contributing

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a "special point of view," having special techniques for "diagnosis and analysis," and as able to function as a "liaison officer" (i.e., as a consultant) (Cornell, 1936, p. 561). She said, and I emphasize, that a school psychologist has "qualifications which distinguish him from the educational supervisor on the one hand, and from the general clinical or academic psychologist on the other" (p. 561).

Back in the 1960s, there was an often paraphrased statement "All of us are smarter than any one of us." It is in this context that psychologists are essential participants in schools. Regular teachers, special education teachers, supervisors, and principals are prepared by educators in educational methods, techniques, and strategies, but not in psychological foundations. Psychologists, by being well educated in the biological bases of behavior, human learning, human development, personality theory, and social psychology as well as having special skills in assessment, bring the special or unique point of view of psychological theory and research to multidisciplinary team meetings and to consultation sessions with teachers and/or administrators. As psychologists meet with educators to discuss the needs of various children, they bring different pedagogical backgrounds to the table. The body of psychological theory and science that psychologists have is essential, imperative, and indispensable to effective schooling.

As did Witmer, Walter, and Cornell, I believe psychologists make great contributions through assessment of individuals and by evaluating individual progress, group behavior, and recently implemented programs. The diagnostic skills of psychologists are essential and not available from other school personnel.

Psychologists are major players in diagnosing individual educational problems and in developing programs to ameliorate or, at least, minimize them. Revised school programs based on assessments should lead to improvement for many children. Periodic re-evaluation by both psychologists and educators is essential. Classification as exceptional should not be in perpetuity. Children found to be in need of special education at one point in their life should not be expected to need special education throughout their life. Whereas children with visual, hearing, and other health impairments; those with multiple disabilities; and those with autism and/or mental retardation may continue to have those disabilities throughout their lives, they compose only 17% of exceptional children ages 6-17 served under Individuals with Disabilities EducationAct (IDEA) Part B and Chapter I of Elementary and Secondary Education Act (ESEA) during the 1992-93 school year according to the 16th annual report to Congress by the U.S. Department of Education. Among the 83% of the other types of exceptional children, many should progress to the stage where little special assistance is necessary. Even for those who cannot be "cured," there is need for regular psychoeducational evaluations to determine if expected progress is being made and/or to determine if there are different strategies or materials that might be helpful.

As many of the 2.32% of children with speech or language impairments improve, so should many of those who have specific learning disabilities, are emotionally disturbed, or are initially diagnosed as mildly mentally retarded. Those who are not showing improvement following re-evaluation should be the subjects for consultation with teachers and administrators. Programs for groups may need to be changed.

Psychologists, especially those prepared in the scientist-practitioner model, should be helpful in evaluating proposed programs for individuals or groups of children/adolescents. Psychologists' knowledge of the process of validation and the technical data that should accompany proffered programs is not generally as available among teachers and administrators. Participation of

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psychologists in decisions pertaining to the adoption of systems and sets of materials should be very helpful. For too long, schools have adopted procedures or techniques that soon become known as irrelevant fads.

Too few educators have knowledge of the people, movements, and writings that underlie many "innovations." This lack of knowledge contributes to implementation of highly touted techniques or procedures without supporting documentation of effectiveness. Interventions which are recommended should have some evidence of usefulness. Those that do not should be used in a study designed to establish validity, not adopted system-wide.

After programs for individuals or groups have been in place, psychologists have the knowledge necessary for evaluation. They are familiar with the necessary instruments or know where to find information about the psychometric quality of instruments used in the evaluation process. They have the statistical background to design effective evaluation models and to carry out data analyses to determine the effectiveness of treatment plans both for individuals and for groups. This function should be more widespread than it is. Doctoral programs should increase their emphasis on techniques related to program evaluation.

Psychologists have group leadership and management skills. More than most participants in multidisciplinary meetings, psychologists have developed skills to enable participants to contribute to the problem solving process. They can constructively synthesize data from several disciplines and help reach consensus. Whether they are "captain" of the team or not, they can seek pertinent information from others and help draw reasonable conclusions. Doctoral programs should focus on developing leaders of groups.

Psychologists help bridge the distance between schools and homes. Psychologists are more able to schedule meetings with parents than are either teachers who have an entire class to manage throughout the school day, or principals who need to be accessible to any of their staff or pupils on a moment's notice. By being in touch with family members before evaluation of children, by including parents in the evaluation process, and by providing information to parents about the evaluations after they are complete, psychologists have established lines of communication with a number of families that can be helpful in other situations. Skills in communicating with adults with various backgrounds are necessary in contemporary training programs.

Psychologists need to be familiar with the array of services available from nonschool sources. Perhaps with counselors and social workers but often by themselves, psychologists need to know where help can be obtained from other agencies and organizations. They need to know how to get needy children and their families into other cooperating systems.

Psychologists are teachers when they provide instruction to professional and paraprofessional personnel or to individuals or groups on such topics as communicating with parents, behavioral contracting, crisis management, and social skills training. As needs arise, psychologists, with their broad preparation in the foundations of psychology, are prepared to develop and provide programs for other staff members. Training should include supervised presentations of staff development activities in addition to individual consultations.

It would probably take a super psychologist—not just a school psychologist—to do all of these things very well. That is why most schools, at least the larger school districts, should be served by psychological service units (American Psychological Association, 1987), not an individual psychologist. A service unit, directed by a doctoral school psychologist with credentials from both the state education agency and the state regulatory board for psychology, can be composed of personnel with different backgrounds and

strengths. They can be called upon as needed to provide a full range of services.

The psychological service center model provides for diversification of service while enabling providers to maintain effective working relationships with others in the system. With a professional school psychologist in charge, a variety of other people can provide effective services. Such a team should include not only psychologists with varying types and levels of preparation, but also paraprofessionals.

There are too many psychological services needed in schools to be provided only by doctoral level personnel. Some services should be provided only by psychologists at the doctoral level. However, much can be provided very effectively by people at other levels, including paraprofessionals. Knowing about the behavior of children in classrooms and other places is very important in a comprehensive evaluation. Many of the mandated observations of a target child, completed in a single 10-15 minute observation session, contribute very little. Enough observation to be valuable requires several visits at various times. Paraprofessionals can be trained to be good, reliable observers of the classroom ecology and of specific children in the class. Paraprofessionals can provide relevant data much more economically than psychologists or other learning specialists.

Similarly, curriculum-based measurement is very important in the evaluation process both for a comprehensive psychological evaluation and also for periodic evaluations of the individual for teachers. Paraprofessionals have been trained to provide this service economically as well.

Clerks can provide data entry for actuarial predictions and program evaluation much more economically than psychologists. Psychologists know what to enter, need to explain how it should be entered, and analyze and interpret the data.

Psychologists, however, are needed to train observers, curriculum-based assessors, and clerical staff, and to direct and coordinate activities whether they are performed by one paraprofessional or several. With paraprofessionals, specialist level personnel, and doctoral psychologists in a psychological service unit providing a wide range of services to a broad spectrum of children, their parents, and teachers, the contributions of psychology to schooling are and will be indispensable.

It is unlikely that anyone concerned with the practice of psychology in the schools 50 years ago thought very much about internships. Probably, only a few souls thought much about internships in the schools 25 years ago. Those who are not thinking about psychology internships in schools and not helping plan their development today are not alert to contemporary issues in education, training, and practice.

There are many forces directing thought to the final stages of doctoral training. I assume other invitees to this forum will address them in more detail than I. It is clear to observers of the contemporary scene that psychologists seek employment following graduation in the arena in which they were socialized to the field (i.e., where they interned). Those who had internships in medical settings, mental health centers, or schools tend to be employed in such settings.

Even cloudy crystal balls allow us to see more health care being delivered through school systems in the immediate future. Increasingly, health care will require providers with health care credentials. Psychologists certified only by state education agencies have not been viewed as health care providers and it is unlikely that they will be in the future. Health care providers have had their advanced or final formal training supervised by established health care providers (i.e., psychologists licensed by state boards for the regulation of the independent practice of psychology).

Therefore, the biggest challenges leaders in school psychology face today are multiple, but related. We must increase:

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1. the number of doctoral level psychologists in schools certified by state education agencies who are licensed also by state boards of psychology,
2. the number of internships in schools accredited as health care training centers to increase the number of licensable psychologists working in schools, and
3. diversity in levels of education and training in schoolpsychological service units to include doctoral and nondoctoral credentialed psychologists (including pre- and post-doctoral interns in many settings) and paraprofessionals to improve the quality of service economically.

As Water said in 1925, "A great deal of work remains to be done in the adaptation of psychological principles to the problems of our schools" (p. 170).

Go Fulcrums!

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